AO 240 (Rev. 10/03) DELAWARE (Rev. 5/06)

UNITED STATES DISTRICT COURT DISTRICT OF DELAWARE

	Del	Plaintiff Plaintiff Aware Police Department, And Sex Carrectional Center Defendant(s)	WITHO FEE	ATION TO P UT PREPAYI S AND AFFII	MENT OF DAVIT	
_		1 77		MBER: 06-700		
I, <u>R</u> e	ndwo	nd Thomas	declare that	I am the (check ar	opropriate box)	
×	Petit	ioner/Plaintiff/Movant				
28 US	C §19	entitled proceeding; that in support of my real 15, I declare that I am unable to pay the coecomplaint/petition/motion.		ings and that I am		
In sup	port of	this application, I answer the following que	stions under penalty	of perjury:	C 1 1 2006	
1.	Are	you currently incarcerated? Yes	□ No (If "N	lo" go to Question	2)	
	If "YES" state the place of your incarceration Maryland Correctional Institution DISTRICT COURT					
	Inm	ate Identification Number (Required): #	334-838		sanned	
		you employed at the institution? Yes Do y			• •	
	Attach a ledger sheet from the institution of your incarceration det six months.		tailing all transact	tions over the past		
			⊠			
2.	2. Are you currently employed? Yes No					
	a.	If the answer is "YES" state the amount of and give the name and address of your ex	•	alary or wages and	pay period	
	b.	If the answer is "NO" state the date of yo salary or wages and pay period and the nation of the salary of wally, Bennett Construction,				
3.	In th	e past 12 twelve months have you received a				
	a. b. c. d. e. f.	Business, profession or other self-employ Rent payments, interest or dividends Pensions, annuities or life insurance payr Disability or workers compensation payr Gifts or inheritances Any other sources	nents nents	Yes Yes Yes Yes Yes Xes	No No No No No No	
		e answer to any of the above is "YES" descri	•			

received AND what you expect you will continue to receive. Self-employment: Handyman-wages 10-100 Month; Disability: Cash and Food Stamp Card-185% (ash (Monthly)-152% Food Stamps (monthly);

AO 240 Reverse (Rev. 10/03) DELAWARE (Rev 5/06)						
4.	Do you have any cash or checking or savings accounts? ✓ Yes □ No					
	If "Yes" state the total amount \$ 13 & ("Institutional)					
5.	Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other					
	valuable property? □ Yes 및 No					
	If "Yes" describe the property and state its value.					
6.	List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, <i>OR</i> state <i>NONE</i> if applicable.					
	None.					
	I Volle.					
	I declare under penalty of perjury that the above information is true and correct.					
	A 10					
	DATE SIGNATURE OF APPLICANT					
	DATE BIONATURE OF AFFLICANT					

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.



FREDERICK NO ZIJ

EV BELLENG AND CHECK

Raymond Thomas#334838
Reymond Thomas#334838
MeI-H
18601 Roxbury R2d.
Hagerstown, Md. 21746
11-4

United States Dietrict Court But N. King Street, Lockbox 18

Wilmington Delaware 19801-3570

liter de la literation de la constitue de la c

1980119851